

The Commonwealth of Massachusetts Department of Public Safety Architectural Access Board

One Ashburton Place, Room 1310 Boston Massachusetts 02108-1618

> Phone: 617-727-0660 Fax: 617-727-0665 www.mass.gov/dps

Docket Number

(Office Use Only)

REQUEST FOR ADJUDICATORY HEARING

RE:			
Name and address of build	ing as appearing on application for	or variance	
I,	, do hereby request that the Architectural Access Board		
conduct an informal Adjudicator	y Hearing in accordance with the	provisions of 801	CMR Rule 1.02 et.
seq. as I am aggrieved by the dec	cision of the Board with respect to	o Section(s)	
of the Rules and Regulations of	the Architectural Access Board,	521 CMR.	
I understand that I may request s	uch a hearing within thirty (30)	days of receipt of th	ne Notice of Action.
Date:	Signature		
PLEASE PRINT:			
	Name		
	Address		
	City/Town	State	Zip Code
	E-mail		
	 Telephone		

PLEASE NOTE:

This form must be received by the Board within thirty (30) days after receipt of the Notice of Action.